

Supplemental Application Data Sheet

Application Information

Application number:: 10/528,747

Filing Date:: 03/22/05

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: IDENTIFICATION OF ANTI-HIV COMPOUNDS
INHIBITING VIRUS ASSEMBLY AND BINDING
OF NUCLEOCAPSID PROTEIN TO NUCLEIC
ACID

Attorney Docket Number:: 015280-462100US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 0

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Robert

Middle Name:: H.

Family Name:: Shoemaker

Name Suffix::

City of Residence:: Boyds

State or Province of Residence:: MD

Country of Residence:: US

Street of Mailing Address:: 22606 Peach Tree Road

City of Mailing Address:: Boyds

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 20841

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Michael

Middle Name::

Family Name:: Currens

Name Suffix::

City of Residence:: Frederick

State or Province of Residence:: MD

Country of Residence:: US

Street of Mailing Address:: 615 Wilson Place

City of Mailing Address:: Frederick
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 21702

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Alan
Middle Name::
Family Name:: Rein
Name Suffix::
City of Residence:: Columbia
State or Province of Residence:: MD
Country of Residence:: US
Street of Mailing Address:: 7295 Swan Point Way
City of Mailing Address:: Columbia
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 21045

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Deceased Inventor
Given Name:: Ya-Xiong
Middle Name::
Family Name:: Feng
Name Suffix::
Applicant Authority Type:: Legal Representative
Primary Citizenship Country:: Peoples Republic of China
Status:: Full Capacity

Given Name:: Hang
Middle Name::
Family Name:: Yuan
Name Suffix::
City of Residence:: Bethesda
State or Province of Residence:: MD
Country of Residence:: US
Street of Mailing Address:: 6613 Bradley Blvd.
City of Mailing Address:: Bethesda
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20817

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name::
Family Name:: Fisher
Name Suffix::
City of Residence:: Sharpsburg
State or Province of Residence:: MD
Country of Residence:: US
Street of Mailing Address:: 17408 Miller's Sawmill Road
City of Mailing Address:: Sharpsburg
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 21782

Applicant Authority Type:: Inventor
Primary Citizenship Country:: United Kingdom

Status:: Full Capacity
Given Name:: Andrew
Middle Name::
Family Name:: Stephen
Name Suffix::
City of Residence:: Catonsville
State or Province of Residence:: MD
Country of Residence:: US
Street of Mailing Address:: 114 North Beechwood Avenue
City of Mailing Address:: Catonsville
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 21228

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Karen
Middle Name::
Family Name:: Worthy
Name Suffix::
City of Residence:: Germantown
State or Province of Residence:: MD
Country of Residence:: US
Street of Mailing Address:: 13801 Wanegarden Drive
City of Mailing Address:: Germantown
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20874

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan
Status:: Full Capacity
Given Name:: Shizuko
Middle Name::
Family Name:: Sei
Name Suffix::
City of Residence:: Bethesda
State or Province of Residence:: MD
Country of Residence:: US
Street of Mailing Address:: 10104 Galsworthy Place
City of Mailing Address:: Bethesda
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20814

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Bruce
Middle Name::
Family Name:: Crise
Name Suffix::
City of Residence:: Washington Grove
State or Province of Residence:: MD
Country of Residence:: US
Street of Mailing Address:: 208 Chestnut Avenue
City of Mailing Address:: Washington Grove
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20880

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Louis
Middle Name::	E.
Family Name::	Henderson
Name Suffix::	
City of Residence::	Mt. Airy
State or Province of Residence::	MD
Country of Residence::	US
Street of Mailing Address::	10296 Quail Trail
City of Mailing Address::	Mt. Airy
State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	21771

Correspondence Information

Correspondence Customer Number:: 45115

Representative Information

Representative Customer Number:: 45115

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2003/032086	10/08/03
PCT/US2003/032086	An Appn claiming benefit under 35 USC 119(e) of	60/416,854	10/08/02

Foreign Priority Information

Country::

Application number::

Filing Date::

Assignee Information

Assignee Name::

The Government of the United States of America

as represented by the Secretary of the

Department of Health and Human Services

Street of mailing address::

6011 Executive Boulevard, Room 325

City of mailing address::

Rockville

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 20852

Submitted by:

Signature

Date July 2, 2009

Printed Name

Jean M. Lockyer, Ph.D.

Registration Number

44,879